See a Social Security Number? Say Something!
Report Privacy Problems to https://public.resource.org/privacy
Or call the IRS Identity Theft Hotline at 1-800-908-4490
**Exempt Organization Business Income Tax Return**  
*(and proxy tax under section 6033(e))*

For calendar year 2013 or other tax year beginning **OCT 1, 2013** and ending **SEP 30, 2014**

Information about Form 990-T and its instructions is available at [www.irs.gov/form990t](http://www.irs.gov/form990t). Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

---

### Part I  Unrelated Trade or Business Income

<table>
<thead>
<tr>
<th>Category</th>
<th>(A) Income</th>
<th>(B) Expenses</th>
<th>(C) Net</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>20,239</td>
<td>20,239</td>
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</tbody>
</table>

**Telephone number**: 973-624-9400

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### Part II  Deductions Not Taken Elsewhere

<table>
<thead>
<tr>
<th>Category</th>
<th>(A) Income</th>
<th>(B) Expenses</th>
<th>(C) Net</th>
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</tbody>
</table>

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**Form 990-T (2013)**

LHA  For Paperwork Reduction Act Notice, see instructions.

10310303 795413 NJISJ 2013.05060 THE NEW JERSEY INSTITUTE FOR NJISJ_1
Part III  Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation.
Controlled group members (sections 1561 and 1563) check here ▶ □ See instructions and:
   a) Enter your share of the $50,000, $25,000, and $9,925,000 taxable income brackets (in that order):
      (1) $ □  (2) $ □  (3) $ □
   b) Enter organization’s share of: (1) Additional 5% tax (not more than $11,750) $ □
      (2) Additional 2% tax (not more than $100,000) $ □
   c) Income tax on the amount on line 34 → □ 35c 2,886.

36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from:
   □ Tax rate schedule or □ Schedule D (Form 1041) → □ 36 36

37 Proxy tax. See instructions ▶ □ 37

38 Alternative minimum tax □ 38

39 Total Add lines 37 and 38 to line 35c or 36, whichever applies □ 39 2,886.

Part IV  Tax and Payments

40a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 40a
   b) Other credits (see instructions) 40b
   c) General business credit Form 3800 40c
d) Credit for prior year minimum tax (attach Form 8801 or 8827) 40d
e) Total credits. Add lines 40a through 40d 40e

41 Subtract line 40e from line 39 → □ 41 2,886.
42 Other taxes. Check if from: □ Form 4255 □ Form 8611 □ Form 8697 □ Form 8866 □ Other (attach schedule) 42
43 Total tax. Add lines 41 and 42 □ 43 2,886.

44 a) Payments: A 2013 overpayment credited to 2013 44a
   b) 2013 estimated tax payments 44b 3,360.
   c) Tax deposited with Form 8888 44c
   d) Foreign organizations: Tax paid or withheld at source (see instructions) 44d
   e) Backup withholding (see instructions) 44e
   f) Credit for small employer health insurance premiums (Attach Form 8941) 44f
g) Other credits and payments:
      □ Form 2439
      □ Form 4136 44g
      □ Other → □ 44g

45 Total payments. Add lines 44a through 44g □ 45 3,360.
46 Estimated tax penalty (see instructions). Check if Form 2220 is attached ▶ □ 46
47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed ▶ □ 47
48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid ▶ □ 48 474.
49 Enter the amount of line 48 you want: Credited to 2014 estimated tax ▶ □ 49 474. Refunded ▶ □ 49 0.

Part V  Statements Regarding Certain Activities and Other Information (see instructions)

1 At any time during the 2013 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If yes, the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If yes, enter the name of the foreign country here ▶ □ Yes □ No 2
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If yes, see instructions for other forms the organization may have to file ▶ □ Yes □ No 3
3 Enter the amount of tax-exempt interest received or accrued during the tax year ▶ □ $ N/A

Schedule A  Cost of Goods Sold. Enter method of inventory valuation ▶ □ N/A

1 Inventory at beginning of year 1 6 Inventory at end of year 6
2 Purchases 2 7 Cost of goods sold Subtract line 6 7
3 Cost of labor 3 from line 5. Enter here and in Part I, line 2
4a Additional section 263A costs (attach schedule) 4a 8 Do the rules of section 263A (with respect to yes □ no)
b) Other costs (attach schedule) 4b property produced or acquired for resale apply to → □ Yes □ No
5 Total. Add lines 1 through 4b 5

Sign Here ▶ □ Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete. Declaration is made on a taxpayer other than the preparer is based on all information of which preparer has any knowledge.

Signature of officer ▶ □ 3/27/15 Date Interim President & CEO

Print/Type preparer’s name ▶ □ JAMES M. WOOD Check □ if self-employed 3/03/15 □ P00310420
Preparer’s signature ▶ □ JAMES M. WOOD, CPA
Date 03/03/15 Firm’s EIN ▶ □ 22-3604710
Paid Preparer Use Only
Firm’s name ▶ □ JAMES M. WOOD, CPA Phone no. (908)431-1700
Firm’s address ▶ □ 603B OMNI DRIVE
Phone no. 323711 12-12-13
0310303 795413 NJISJ 2013.05060 THE NEW JERSEY INSTITUTE FO NJISJ_1
THE NEW JERSEY INSTITUTE FOR SOCIAL JUSTICE, INC. 22-3478143

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)  
(see instructions)

1. Description of property
   (1)
   (2)
   (3)
   (4)

2. Rent received or accrued
   (a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50% )
   (1)
   (2)
   (3)
   (4)
   Total

   (b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)
   (1)
   (2)
   (3)
   (4)
   Total

3a) Deductions directly connected with the income in columns 2a and 2b (attach schedule)
   (1)
   (2)
   (3)
   (4)
   Total

(c) Total income. Add totals of columns 2a and 2b. Enter here and on page 1, Part I, line 6, column (A)
   (a) Total deductions. Enter here and on page 1, Part I, line 6, column (B)

Schedule E - Unrelated Debt-Financed Income  
(see instructions)

1. Description of debt-financed property
   (1)
   (2)
   (3)
   (4)

2. Gross income from or allocable to debt-financed property
   (a) Straight line depreciation
   (attach schedule)
   (1)
   (2)
   (3)
   (4)
   %

   (b) Other deductions
   (attach schedule)

   5. Average adjusted basis of or allocable to debt-financed property (attach schedule)
   6. Column 4 divided by column 5
   7. Gross income reportable (column 2 x column 6)
   8. Allocable deductions (column 5 x total of columns 3a and 3b)

   (1)
   (2)
   (3)
   (4)
   %

Totals

Total dividends-received deductions included in column 8

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations  
(see instructions)

1. Name of controlled organization
   (1)
   (2)
   (3)
   (4)

2. Employer identification number

3. Net unrelated income (loss) (see instructions)

4. Total of specified payments made

5. Part of column 4 that is included in the controlling organization's gross income

6. Deductions directly connected with income in column 5

Nonexempt Controlled Organizations

7. Taxable income
   (1)
   (2)
   (3)
   (4)

8. Net unrelated income (loss) (see instructions)

9. Total of specified payments made

10. Part of column 9 that is included in the controlling organization's gross income

11. Deductions directly connected with income in column 10

   Add columns 5 and 10
   Enter here and on page 1, Part I, line 8, column (A)

   Add columns 6 and 11
   Enter here and on page 1, Part I, line 8, column (B)

Totals

323721 12-12-13

10310303 795413 NJISJ 2013.05060 THE NEW JERSEY INSTITUTE FOR NJISJ_1
### Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization

1. Description of income
2. Amount of income
3. Deductions directly connected (attach schedule)
4. Set-asides (attach schedule)
5. Total deductions and set-asides (col. 3 plus col. 4)

<table>
<thead>
<tr>
<th>(1)</th>
<th>(2)</th>
<th>(3)</th>
<th>(4)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>Enter here and on page 1, Part I, line 6, column (A)</td>
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<tr>
<td>Totals</td>
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<td>Enter here and on page 1, Part I, line 9, column (B)</td>
</tr>
</tbody>
</table>

### Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income

1. Description of exploited activity
2. Gross unrelated business income from trade or business
3. Expenses directly connected with production of unrelated business income
4. Net income (loss) from unrelated trade or business (column 2 minus column 3) if a gain, compute cols 5 through 7
5. Gross income from activity that is not unrelated business income
6. Expenses attributable to column 5
7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)

<table>
<thead>
<tr>
<th>(1)</th>
<th>(2)</th>
<th>(3)</th>
<th>(4)</th>
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</thead>
<tbody>
<tr>
<td></td>
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<td>Enter here and on page 1, Part I, line 10, col. (A)</td>
</tr>
<tr>
<td>Enter here and on page 1, Part I, line 10, col. (B)</td>
<td></td>
<td></td>
<td>Enter here and on page 1, Part I, line 26</td>
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<tr>
<td>Totals</td>
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</tr>
</tbody>
</table>

### Schedule J - Advertising Income

Part I | Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical
2. Gross advertising income
3. Direct advertising costs
4. Advertising gain or loss (col. 2 minus col. 3) if a gain, compute cols 5 through 7
5. Circulation income
6. Readership costs
7. Excess readership costs (column 6 minus column 5, but not more than column 4)

<table>
<thead>
<tr>
<th>(1)</th>
<th>(2)</th>
<th>(3)</th>
<th>(4)</th>
</tr>
</thead>
<tbody>
<tr>
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<tr>
<td>Totals (carry to Part II, line (5))</td>
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<td>0.</td>
</tr>
</tbody>
</table>

Part II | Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical
2. Gross advertising income
3. Direct advertising costs
4. Advertising gain or loss (col. 2 minus col. 3) if a gain, compute cols 5 through 7
5. Circulation income
6. Readership costs
7. Excess readership costs (column 6 minus column 5, but not more than column 4)

<table>
<thead>
<tr>
<th>(1)</th>
<th>(2)</th>
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<th>(4)</th>
</tr>
</thead>
<tbody>
<tr>
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<tr>
<td>Totals from Part I</td>
<td></td>
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<td>0.</td>
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</tbody>
</table>

Totals, Part II (lines 1-5) | | | 0. |

### Schedule K - Compensation of Officers, Directors, and Trustees

1. Name
2. Title
3. Percent of time devoted to business
4. Compensation attributable to unrelated business

<table>
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<th>(1)</th>
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<tr>
<td>Totals. Enter here and on page 1, Part II, line 14</td>
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<td>0.</td>
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</table>
INVESTMENTS IN DEBT-FINANCED REAL ESTATE PARTNERSHIPS

TO FORM 990-T, PAGE 1

<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>LS LIVINGSTON CORP</td>
<td>231.</td>
</tr>
<tr>
<td>LOWENSTEIN Sandler Borchin Kohl &amp; Fisher</td>
<td>20,008.</td>
</tr>
<tr>
<td><strong>TOTAL TO FORM 990-T, PAGE 1, LINE 5</strong></td>
<td><strong>20,239.</strong></td>
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</tbody>
</table>
Form 8868
(Rev. January 2014)

Application for Extension of Time To File an
Exempt Organization Return

File a separate application for each return.

Information about Form 8868 and its instructions is at www.irs.gov/forms8868.

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box □

If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file) - You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I  Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer’s identifying number

Type or print

Name of exempt organization or other filer, see instructions.

THE NEW JERSEY INSTITUTE FOR SOCIAL
JUSTICE, INC.

Employer identification number (EIN) or

Social security number (SSN)

File by the due date for filing your return. See instructions

Number, street, and room or suite no. If a P.O. box, see instructions.

60 PARK PLACE, NO. 511

City, town or post office, state, and ZIP code. For a foreign address, see instructions.

NEWARK, NJ 07102-5504

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application

Is For

Return Code

Application

Is For

Return Code

Form 990 or Form 990-EZ

01

Form 990-T (corporation)

07

Form 990 BL

02

Form 1041-A

08

Form 4720 (individual)

03

Form 4720 (other than individual)

09

Form 990-PF

04

Form 5227

10

Form 990-T (sec. 401(a) or 408(a) trust)

05

Form 6069

11

Form 990-T (trust other than above)

06

Form 8870

12

THE ORGANIZATION

The books are in the care of ▶ 60 PARK PLACE, NO. 511 – NEWARK, NJ 07102-5504

Telephone No. ▶ 973-624-9400 Fax No. ▶

If the organization does not have an office or place of business in the United States, check this box □

If this is for a Group Return, enter the organization’s four digit Group Exemption Number (GEN) ▶

If this is for the whole group, check this box □.

If it is for part of the group, check this box □ and attach a list with the names and EINs of all members the extension is for.

I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until MAY 15, 2015, to file the exempt organization return for the organization named above. The extension is for the organization’s return for:

Calendar year or Tax year beginning OCT 1, 2013, and ending SEP 30, 2014.

If the tax year entered in line 1 is for less than 12 months, check reason: □ Initial return □ Final return □ Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.

3b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

3c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-E0 and Form 8879-E0 for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2014)

42

10310303 795413 NJISJ 2013.05060 THE NEW JERSEY INSTITUTE FOR NJISJ_1